U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10708515 Application Number 'RANSMI Filing Date March 9, 2004 For FY 2008 First Named Inventor Ronald L. Gordon **Examiner Name** David Rashid Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2624 TOTAL AMOUNT OF PAYMENT 810.00 Attorney Docket No. FIS920030380US1 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 09-0458 Deposit Account Name: IBM East Fishkill For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES **EXAMINATION FEES** SEARCH FEES **Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 210 155 510 255 105 Design 210 105 100 50 130 65 Plant 210 105 310 160 80 155 Reissue 310 155 510 255 620 310 Provisional 210 105 0 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** Fee Paid (\$) 50.00 Fee (\$) HP = highest number of total claims paid for, if greater than 20. Extra Claims Indep. Claims Fee (\$) Fee Paid (\$) -3 or HP =210.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets Fee (\$) (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): REQUEST CONTINUED EXAMINATION 810.00

SUBMITTED BY			
Signature	(ADVZLE)	Registration No. (Attorney/Agent) 31,867	Telephone <sub>203-787-0595</sub>
	Peter W. Peterson		Date 2008-01-16

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Approved for use through 09/30/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10708515 TRANSMITTAL Filing Date March 9, 2004 First Named Inventor **FORM** Ronald L. Gordon Art Unit 2624 Examiner Name David Rashid (to be used for all correspondence after initial filing) Attorney Docket Number FIS920030380US1 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC  $\checkmark$ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application REQUEST CONTINUED EXAMINATION Reply to Missing Parts under 37 CFR 1.52 or 1.53

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name	DeLio & Peterson, LLC							
Signature	19602	A.						
Printed name	Peter W. Peterson							
Date	January 16, 2008			Reg. No.	31,867			

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